MODERN METHODS OF TREATMENT AND REHABILITATION OF PATIENTS WITH ACNE VULGARIS

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Relevance. Acne (acne) is a chronic recurrent disease of the sebaceous glands and hair follicles. Acne is one of the most pressing problems of modern dermatology. This is due to the prevalence of this pathology, an increase in the number of intractable forms, as well as an increase in resistance to antibacterial drugs. The first manifestation is more often manifested during puberty, affects up to 85% of boys and girls aged 12 to 24 years, and 10% persists until the age of 25–45 years. Cosmetic defects in acne are the cause of psychoemotional disorders of patients, often of a depressive nature, reduce self-esteem and quality of life, which allows us to regard acne as a serious medical and social problem. Since the main group of patients with this disease are adolescents in a period of high lability and susceptibility to various kinds of problems, rashes on the face are of great importance both for them and for their parents. In this group of patients, especially when it comes to people with severe acne, the quality of life is significantly reduced, which can directly affect the psychosocial adaptation of these individuals. Of particular concern is the fact that when contacting a dermatologist in persons with acne, metabolic changes are often noted — obesity, striae (superficial atrophy of the skin), pronounced disorders in the gastrointestinal tract, diabetes mellitus. Treatment of this group of patients significantly complicates tactics.

Purpose of the study. Develop effective tactics for the treatment and prevention of acne

Material and research methods. Of the total number of patients with acne, 24 patients with moderate and severe severity with concomitant diseases (obesity, striae, colitis, enterocolitis) were selected. All patients were examined by related specialists and the necessary laboratory and instrumental examination was performed. According to the treatment standards, they were prescribed systemically: zinc oxide, retinoids, hepatoprotectors, probiotics, macrolide antibiotics, enterosorbents.Topically: the first 4–5 days ichthyol ointment under the bandage, followed by replacement with a solution containing 10 mg of clindamycin hydrochloride in 1 ml, 8 mg of metronidazole, 2 times a day. All children were examined by an endocrinologist, a gastroenterologist and, based on their recommendation, menus were drawn up for each patient.

Research results. All patients were overweight from or more, more than had superficial atrophy (striae) on the shoulders, hips and lower abdomen. The diet of almost all patients was based on the abuse of flour products, sausages, fast foods, sweets, carbonated drinks, etc. and with the almost complete absence of fiber and vegetables in their menu. For this group, with the direct participation of their parents, food diaries with dietitian recommendations were issued (only healthy lifestyle products were present). It is strongly recommended to increase the time of an active lifestyle. Retinoids were prescribed strictly with the consent of the endocrinologist and for a long time — 4–6 months, antibiotics macrolides were mainly presented in the form of doxycycline monohydrate — 0.1–2 times a day after meals for 10–15 days, probiotics (lacto and bifidobacteria) , Zn oxide. Local therapy was well tolerated by all patients and improvement (reduction in pain and the absence of new elements) was noted by everyone already 3–4 days from the start of therapy.

None of the patients presented subjective complaints on the 20–25 day after the start of treatment. In places of resolved elements, there were cicatricial changes in the form of post-acne, minor infiltration. The topical application of a solution of clindamycin hydrochloride and metronidazole was continued for an average of 40–45 days, then it was replaced with cyteal 1–2 times a day. Long-term adherence to the diet and a healthy lifestyle, in our opinion, were also the key to successful treatment. On average for 4–6 months. When examining the patients, we noted a persistent therapeutic effect in 91%, and in this group, as directed by the endocrinologist, the appointment of a systemic retinoid was suspended.

Conclusion. Today, solving the problem of acne requires a delicate approach. It is necessary to take into account changes in the nature of nutrition and the state of internal organs. Adequate therapy with dynamic monitoring of severe forms of acne provides a positive effect.